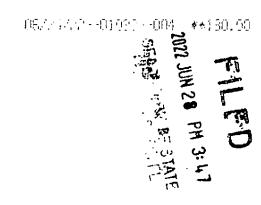
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	w Filing Secti ision of Corp				
SUBJECT:	AVZ TRAN	sportule: /	\VZ Log		2 Transport 1 LL
		Name o	of Limited Liab	oility Company	,
The enclosed	d Articles of C	Organization and feet	s) are submitt	ed for filing.	
Please return	all correspor	dence concerning th	is matter to th	e following:	
,	ARTURO VE	LAZQUEZ			
-		· <u>-</u>	Name	of Person	<u>-</u>
			Firm/	Соптрапу	
I	1074 SPANIS	H BAY COURT			
-	<u> </u>		Ad	dress	
(ORANGE PA	RK, FL 32065			
e:	cpandglobalin	c@gmail.com	City/State	and Zip Code	
_	·		used for futur	e annual report notificat	ion)
For further inf	formation con	cerning this matter. [olease call:		
Å	ARTURO VE		908 at (230-7381	
	Name	of Person	Area Code	Daytime Telephon	ne Number
Enclosed is	j a check for th	e following amount:			
□\$125.00 E	Filing Fee	설\$130.00 Filing F Certificate of Statu	is Cert	155.00 Filing Fee & ified Copy onal copy is enclosed)	□\$160.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)
	Mailing	Address		Street Address	

New Filing Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Street Address
New Filing Section Division The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

DocuSign Envelope ID 9A588F58-9C45-4738-9BBB-72D5F9275BF0 ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY ARTICLE 1 - Name: The name of the Limited Liability Company is: ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liability Company is: Principal Office Address: Mailing Address: 1074 SPANISH BAY COURT orange fare, FL 32005 ORANGE PARK, FL 32065 ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature: (The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.) The name and the Florida street address of the registered agent are:

CAPITAL CITY CAL		WICES
	Name	
3219 BODMIN MOO	R DR.	
Florida street address	(P.O. Box <u>NOT</u> ac	cceptable)
TALLAHASSEE	FL.	32317
City	State	Zip

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S.,

Sandra M (onception
Registered Agent's Signature (REQUIRED)

(CONTINUED)

Title:	Name and Address:
"AMBR" = Authorized Member "MGR" = Manager	
MGR	ARTURO VELAZOUEZ
	1074 SPANISH BAY COURT
	ORANGE PARK, FL 32065
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	vi All
	<u> </u>
fective date is listed, the date mus of filing.)	the date of filing:
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EV: Effective date, if other than fective date is listed, the date must of filing.) If the date inserted in this block do ment's effective date on the Department's effective date on the Department. EVI: Other provisions, if any. Signature This document is a may aware that a constitutes a thir	Docusioned by Of a member or an authorized representative of a member. s executed in accordance with section 605.0203 (1) (b). Florida Statutes. any false information submitted in a document to the Department of State.